

PART B - FEE(S) TRANSMITTAL

plete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1456
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate carnot be used for any other accompanying pepers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. · CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for my change of address)

52835

7590

09/29/2009

HAMRE, SCHUMANN, MUELLER & LARSON, P.C. P.O. BOX 2902

MINNEAPOLIS, MN 55402-0902

12/01/2009 RMEBRAH1 00000102 503478 10588625

01 FC:1501 02 FC:1504 1510.00 DA 300.00 DA

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

| Heidi McCarty | (Dopostor's name |
|------------------|------------------|
| Mandle 17 | (Signetur |
| 30 November 2006 | (Date |
| | |

| APPLICATION NO. | . FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|---------------|----------------------|---------------------|------------------|
| 10/588,625 | 08/04/2006 | Chojiro Kuriyama | 10921.422USWO | 7233 |

TITLE OF INVENTION: SOLID ELECTROLYTIC CAPACITOR

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(5) DUE | DATE DUE | |
|---|---|--|--|---|---|--|--|
| nosprovisional | NO | \$1510 | \$300 | \$0 | \$1810 | 12/29/2009 | |
| EXAM | 1INER | ART UNIT | CLASS-SUBCLASS | | | | |
| SINCLAIR | , DAVID M | 2831 | 361-523000 | • | | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Tee Address indication (or "Pee Address" indication form PTO/SB/47: Ray 03-02 or more receast attached. Use of a Constoner. | | 2. For printing on the patent frost page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is | | | ann, Mueller & Larson, P | | |
| PLEASE NOTE: Un | ND RESIDENCE DATA | ified below, no assignee | listed, no asine will be THE PATENT (print or typ data will appear on the pa T a substitute for filing an | pc) atent. If an assismoe is id | entified below, the doc | ument has been filed for | |
| (A) NAME OF ASSI | | and be the local by the | (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | |
| ROHM C | O., LTD. | | KYOTO, JAPAN | | | | |
| Please check the appropr | riate assignee category or | categories (will not be pr | rinted on the patent): | Individual Corporati | on or other private group | entity Government | |
| | are submitted: No small entity discount p # of Copies | ermitted) | Payment of Fec(s): (Please first reapply any previously paid issue fee shows above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3478 (enclose an extra copy of this form). | | | | |
| a. Applicant claim | tus (from status indicate is SMALL ENTITY state of Publication Fee (if res | s. Sec 37 CFR 1.27. | b. Applicant is no long d from anyone other than it Office. | gor claiming SMALL ENT | | | |
| Authorized Signature | 01/1/ | tes Patent and Trademark | : Office. | Date 30 Novem | | | |
| Typed or printed nam | Douglas P. Mu | ieller | Registration No. 30,300 | | | | |
| This collection of inform | uation is required by 37 C tiality is governed by 35 d application form to the tons for reducing this but firginia 22313-1450. DO | FR 1.311. The information | on is required to obtain or n 1,14. This collection is est depending upon the indiv- e Chief Information Office COMPLETED FORMS TO | etain a benefit by the publi imated to take 12 minutes idual case. Any comment of U.S. Patent and Tradem THIS ADDRESS, SEND | to which is to file (and be to complete, including a son the amount of time ark Office, U.S. Departs TO: Commissioner for | y the USPTO to process) gathering, preparing, and you require to complete nent of Commerce, F.O. Patents, P.O. Box 1450, | |

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE